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CONFIRMATION NO. 1835

Bib Data Sheet

SERIAL NUMBER 10/071,930	FILING OR 371(c) DATE 02/08/2002 RULE	CLASS 623	GROUP ART UNIT 3738	ATTORNEY DOCKET NO. KM-FLEX-1
APPLICANTS Kevin A. Mansmann, Paoli, PA;				
** CONTINUING DATA ***** This appln claims benefit of 60/265,921 02/05/2001				
** FOREIGN APPLICATIONS *****				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 03/06/2002				
Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Allowance Verified and Acknowledged		STATE OR COUNTRY PA	SHEETS DRAWING 4	TOTAL CLAIMS 12
Examiner's Signature _____ Initials _____		INDEPENDENT CLAIMS 2		
ADDRESS 29369				
TITLE Cartilage repair implant with soft bearing surface and flexible anchoring device				
FILING FEE RECEIVED 435	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	